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## APPLICANTS

Thomas D. Lyster, Bothell, WA;  
 Thomas Solosko, Issaquah, WA;  
 Carlton B. Morgan, Bainbridge Island, WA;  
 Kim J. Hansen, Renton, WA;  
 Daniel J. Powers, Issaquah, WA;  
 Hans Patrick Griesser, Bainbridge, WA;  
 Eric L. Jonsen, Seattle, WA;  
 David E. Snyder, Bainbridge Island, WA;

## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/23/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature <u>6</u> Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
WA	55	177	61

## ADDRESS

Patent Counsel  
 Philips Electronics North America Corp.  
 580 White Plains Road  
 Tarrytown, NY 10591-5190

## TITLE

Medical electrode and release liner configurations facilitating packaged electrode characterization

FILING FEE RECEIVED 8176	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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